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Fill in this information to identify your case:					
United States Bankruptcy Court for the: WESTERN DISTRICT OF VIRGINIA					
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13				

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	identity	Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Bradley First Name Thomas Middle Name	Sherry First Name Cash Middle Name		
	1 7	Combes	Combes		
	Bring your picture identification to your meeting	Last Name	Last Name		
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8	First Name	First Name		
	years Include your married or	Middle Name	Middle Name		
	maiden names.	Last Name	Last Name		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx - xx - <u>1 4 2 2</u> OR	xxx - xx - 7 0 6 3 OR		
	Identification number (ITIN)	9xx - xx	9xx - xx		

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	AL	AL (B.) (60
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	✓ I have not used any business names or EINs
(EIN) you have used in the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	225 Frost Drive	
	Number Street	Number Street
	Concord VA 24538	
	City State ZIP Code	City State ZIP Code
	Campbell County	County
	the one above, fill it in here. Note that the court will send any notices to you at this	from yours, fill it in here. Note that the court will send any notices to you at this mailing
	mailing address.	address.
	PO Box 573	
		Number Street
	PO Box 573	
	PO Box 573 Number Street P.O. Box Concord VA 24538	Number Street P.O. Box
	PO Box 573 Number Street P.O. Box	Number Street
Why you are choosing	PO Box 573 Number Street P.O. Box Concord VA 24538	Number Street P.O. Box
Why you are choosing this district to file for bankruptcy	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code	Number Street P.O. Box City State ZIP Code
this district to file for	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer
this district to file for bankruptcy	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain.	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain.
this district to file for bankruptcy Tell the Cou	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) rt About Your Bankruptcy Case	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
this district to file for bankruptcy	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
this district to file for bankruptcy Tell the Cou	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) rt About Your Bankruptcy Case Check one: (For a brief description of each, see Noti	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
The chapter of the Bankruptcy Code you are choosing to file	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) rt About Your Bankruptcy Case Check one: (For a brief description of each, see Noti for Bankruptcy (Form 2010)). Also, go to the top of p	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
The chapter of the Bankruptcy Code you are choosing to file	PO Box 573 Number Street P.O. Box Concord VA 24538 City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) rt About Your Bankruptcy Case Check one: (For a brief description of each, see Noti for Bankruptcy (Form 2010)). Also, go to the top of p ☐ Chapter 7	Number Street P.O. Box City State ZIP Code Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 1 Bradley Thomas C Sherry Cash Comb		i		Case num	ber (if known)		
8.	How you will pay the fee		court pay w	pay the entire fee when I file my petiti for more details about how you may pay with cash, cashier's check, or money orde f, your attorney may pay with a credit ca	r. Typically er. If your	y, if you are pay attorney is subr	ing the fee yourself, you may nitting your payment on your	
				d to pay the fee in installments. If you duals to Pay Your Filing Fee in Installme			and attach the Application for	
		_	By lave than fee in	request that my fee be waived (You may request this option only if you are filing for Chap y law, a judge may, but is not required to, waive your fee, and may do so only if your incom an 150% of the official poverty line that applies to your family size and you are unable to put in installments). If you choose this option, you must fill out the Application to Have the Colling Fee Waived (Official Form 103B) and file it with your petition.				
ba	Have you filed for		No					
	bankruptcy within the last 8 years?		Yes.					
		Distri	ict _		When		Case number	
		Distri Distri			_ When	MM / DD / YYYY	Case number	
		Distri			WIICH	MM / DD / YYYY	Case number	
10.	Are any bankruptcy cases pending or being		No					
	filed by a spouse who is		Yes.					
	not filing this case with you, or by a business	Debte	or _			Relationshi	p to you	
	partner, or by an affiliate?	Distri	ict _			MM / DD / YYYY	Case number,if known	
		Debte	or _			Relationshi	ip to you	
		Distri	ict		When	MM / DD / YYYY	Case number,if known	
11.	Do you rent your residence?		No. Yes.	Go to line 12. Has your landlord obtained an eviction residence? No. Go to line 12. Yes. Fill out Initial Statement About	judgment	against you and	d do you want to stay in your	

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	tor 1 tor 2	Bradley Thomas Co Sherry Cash Combe		s	Case number (if k	known)		
Pa	art 3:	Report About An	уΒι	ısine	sses You Own as a Sole Proprietor			
12.		u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any Number Street			
	sole pro	ave more than one oprietorship, use a e sheet and attach it etition.			City Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 10 Single Asset Real Estate (as defined in 11 U.S.C. § 101(53A)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(60) None of the above	§ 101(51B)	ZIP Cod	de
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		can mos	set ap st rece	filing under Chapter 11, the court must know whether you opropriate deadlines. If you indicate that you are a small but balance sheet, statement of operations, cash-flow state of these documents do not exist, follow the procedure in 11	business de ement, and	ebtor, you federal ind	must attach your come tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Chapter 11.				
		efinition of small s debtor, see		No.	I am filing under Chapter 11, but I am NOT a small busing the Bankruptcy Code.	ness debtoi	according	g to the definition in
	11 U.S.	C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small business of Bankruptcy Code.	debtor acco	ording to th	ne definition in the
Pa	art 4:	Report If You Ow	n o	r Hav	e Any Hazardous Property or Any Property	That Nee	ds Imm	ediate Attentior
14.	propert alleged immine	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		No Yes.	What is the hazard?			
	safety?				If immediate attention is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property? Number Street			
					City		State	ZIP Code

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Debtor 1 **Bradley Thomas Combes** Debtor 2 Sherry Cash Combes Case number (if known) Part 5: **Explain Your Efforts to Receive a Briefing About Credit Counseling** 15. Tell the court **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): whether you You must check one: You must check one: I received a briefing from an approved credit have received I received a briefing from an approved credit briefing about counseling agency within the 180 days before I counseling agency within the 180 days before I credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment The law requires plan, if any, that you developed with the agency. plan, if any, that you developed with the agency. that you receive a ☐ I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I counseling before filed this bankruptcy petition, but I do not have filed this bankruptcy petition, but I do not have you file for a certificate of completion. a certificate of completion. bankruptcy. You Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, must truthfully you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment check one of the plan, if any. plan, if any. following choices. If you cannot do so, ☐ I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling you are not eligible services from an approved agency, but was services from an approved agency, but was to file. unable to obtain those services during the 7 unable to obtain those services during the 7 days after I made my request, and exigent days after I made my request, and exigent If you file anyway, circumstances merit a 30-day temporary circumstances merit a 30-day temporary the court can waiver of the requirement. waiver of the requirement. dismiss your case, To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the you will lose requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what whatever filing fee efforts you made to obtain the briefing, why you efforts you made to obtain the briefing, why you you paid, and your were unable to obtain it before you filed for were unable to obtain it before you filed for creditors can begin bankruptcy, and what exigent circumstances bankruptcy, and what exigent circumstances collection activities required you to file this case. required you to file this case. again. Your case may be dismissed if the court is Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, You must file a certificate from the approved agency, along with a copy of the payment plan you along with a copy of the payment plan you developed, if any. If you do not do so, your case developed, if any. If you do not do so, your case may be dismissed. may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. ☐ I am not required to receive a briefing about ☐ I am not required to receive a briefing about credit counseling because of: credit counseling because of: Incapacity. I have a mental illness or a mental ☐ Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. □ Disability. My physical disability causes me □ Disability. My physical disability causes me

Official Form 101

to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

to be unable to participate in a

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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Debtor 1 Bradley Thomas Sherry Cash Com								n)		
P	art 6: Answ	er These Que	esti	ons for Reporting Pu	rpos	ses				
16. What kind of debts do you have?			l6a.							
		1	l6b.			iness debts? Business debts ment or through the operation		debts that you incurred to obtain e business or investment.		
		1	16c.	State the type of debts you	u owe	e that are not consumer or bus	iness	debts.		
17.	Are you filing ur Chapter 7?	_	√	No. I am not filing under	Chap	eter 7. Go to line 18.				
	Do you estimate any exempt projexcluded and administrative e are paid that fun available for dis to unsecured cre	perty is xpenses ids will be tribution		-	•	•	-	xempt property is excluded and to distribute to unsecured creditors?		
18.	How many credi you estimate the owe?	L		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
19.	How much do you estimate your as be worth?	ssets to	→	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do yo estimate your liabe?	abilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

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MM / DD / YYYY

Debtor 1 Debtor 2	Bradley Thomas C Sherry Cash Com		Case number (if known)			
Part 7:	Sign Below					
or you		I have examined this petition, and I declare un and correct.	der penalty of perjury that the information provided is true			
		·	aware that I may proceed, if eligible, under Chapter 7, 11, 12, tand the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay fill out this document, I have obtained and reach	or agree to pay someone who is not an attorney to help med the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		•	aling property, or obtaining money or property by fraud in n fines up to \$250,000, or imprisonment for up to 20 years, 571.			
		X /s/ Bradley Thomas Combes	X /s/ Sherry Cash Combes			
		Bradley Thomas Combes, Debtor 1	Sherry Cash Combes, Debtor 2			
		Executed on 06/05/2017	Executed on 06/05/2017			

MM / DD / YYYY

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Debtor 1 Debtor 2	Bradley Thomas (Sherry Cash Com		Case number (if kno	wn)				
represente	not represented by y, you do not need	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
		X /s/ Heidi Shafer for Cox Law Gr Signature of Attorney for Debtor	oup, PLLC Dat	e <u>06/05/2017</u> MM / DD / YYYY				
		Heidi Shafer for Cox Law Group Printed name	p, PLLC					
		Cox Law Group, PLLC Firm Name 900 Lakeside Drive Number Street						
		Lynchburg City	VA State	24501-3602 ZIP Code				
		Contact phone (434) 845-2600	Email address heid	i@coxlawgroup.com				
		48765	State	<u> </u>				
		Bar number	State					

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Fill in this inf	ormation to ide	entify your case	and this filing:		
Debtor 1	Bradley	Thomas	Combes		
Debtor 2	Sherry	Middle Name Cash	Last Name Combes		
(Spouse, if filing)	First Name	Middle Name	Last Name		
	nkruptcy Court for t	he: WESTERN DI	STRICT OF VIRGINIA		
Case number (if known)				_	if this is an ed filing
Official Form Schedule A	_				12/15
the asset in the ca filing together, bo sheet to this form	ategory where you th are equally res . On the top of an	think it fits best. E ponsible for supply y additional pages,	ist an asset only once. If an asset and accurate asing correct information. If mor write your name and case numers, Land, or Other Real E	s possible. If two married pe re space is needed, attach a s nber (if known). Answer ever	ople are separate ry question.
1. Do you own o	or have any legal o	or equitable interes	t in any residence, building, la		
1.1. 225 Frost Drive Street address, if availa	able, or other description	Check all	he property? that apply. e-family home	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on <i>Schedule D:</i>
		Cond	ex or multi-unit building ominium or cooperative	Current value of the entire property?	Current value of the portion you own?
City Campbell	VA 245 State ZIP 0	Code		\$198,800.00 Describe the nature of you interest (such as fee simple entireties, or a life estate)	le, tenancy by the
County			an interest in the property?	Tenants by Entireties	
225 Frost Drive Concord, VA 24538 CTA Value \$198,800.00		Check on Debto		Check if this is comm (see instructions)	unity property
			ormation you wish to add abouidentification number: 18G	ut this item, such as local 1 47	_
	•	•	of your entries from Part 1, incrite that number here		\$198,800.00
Part 2: Des	scribe Your Ve	hicles			
•	•	•	n any vehicles, whether they a also report it on Schedule G: Ex	_	•
3. Cars, vans, tr	ucks, tractors, sp	ort utility vehicles,	motorcycles		
□ No ☑ Yes					

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Debte Debte	,	/ Thomas Combes Cash Combes	Ca:	se number (if known)	
3.1. Make Mode Year: Appro	el:	Jeep Commander 2007 170,000	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Do not deduct secured claimount of any secured claimount of any secured claimount of the current value of the entire property? \$3,583.00	ims on Schedule D:
2007 1700 KBB	r information: 7 Jeep Comma 1000 miles) 8 Private Party 83.00	nder (approx. Value Fair Condition	Check if this is community property (see instructions)		
	Examples: Boats No Yes	s, trailers, motors, perso	s and other recreational vehicles, other vehicles and watercraft, fishing vessels, snowmobiles, not watercraft and the second sec	notorcycle accessories	
	entries for page	s you have attached fo	or Part 2. Write that number here	······	\$3,583.00
Pa	rt 3: Desci	ribe Your Persona	l and Household Items		
6.	Household good	ds and furnishings	interest in any of the following items? nens, china, kitchenware		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	pe 2 Sofas/Couch Refrigerator, 1 Washer, 1 Drye	es, 1 Love Seats, 1 Kitchen Table, 6 Kit Dishwasher, 1 Microwave, 2 Other Kitc er, 2 Recliner Chairs, 1 Entertainment C 2 Nightstands, 3 Dressers, 3 Beds, 3 La	chen Appliances, 1 center, 2 Desks, 1	\$780.00
	musio		o, video, stereo, and digital equipment; comput devices including cell phones, cameras, media	•	
	□ No ☑ Yes. Descrik	oe 3 TV's, 3 DVD	Players, 1 Stereo, 1 Computer		\$250.00
		ues and figurines; paint	ings, prints, or other artwork; books, pictures, cocollections; other collections, memorabilia, co	•	
	✓ No ✓ Yes. Describ	oe			
	Examples: Sport		se, and other hobby equipment; bicycles, pool ty tools; musical instruments	ables, golf clubs, skis;	
	No ✓ Yes. Describ	pe See continuati	on page(s).		\$395.00
	Firearms Examples: Pistol ☑ No ☐ Yes. Describ	_	nunition, and related equipment		

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	otor 1 otor 2	Bradley Thomas Combe Sherry Cash Combes	es	Case number (if known)	
11.	Clothes Example		eather coats, designer wear, shoe	s, accessories	
	_	s. Describe Men's & Wo	omen's Clothing		\$500.00
12.	Jewelry Example	•	ne jewelry, engagement rings, wed	dding rings, heirloom jewelry, watches, gems,	
	□ No ✓ Yes	s. Describe See contin	uation page(s).		\$160.00
13.		rm animals les: Dogs, cats, birds, horses	3		
	□ No ✓ Yes	s. Describe 1 Dog			\$10.00
14.	Any otl	•	d items you did not already list,	including any health aids you	
		s. Give specific ormation 2 Eyeglas	sses		\$50.00
15.			entries from Part 3, including ar ber here	y entries for pages you have	\$2,145.00
P	art 4:	Describe Your Finan	ncial Assets		
Do :	you own	or have any legal or equita	able interest in any of the follow	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	les: Money you have in your petition	wallet, in your home, in a safe dep	posit box, and on hand when you file your	
	□ No ✓ Yes	S		Cash:	\$10.00
17.	•	• •		of deposit; shares in credit unions, ve multiple accounts with the same	
	□ No ✓ Yes	S	Institution name:		
	17	7.1. Checking account:	Wells Fargo Checking acc	ount	\$50.00
18.	Examp	•	raded stocks accounts with brokerage firms, mo	oney market accounts	
	✓ No ☐ Yes		on or issuer name:		

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	tor 1 tor 2	Bradley Thoma Sherry Cash C			Case number (if known)	
19.	an inter	-	k and interests in inc rtnership, and joint v	corporated and unincorpora renture	ated businesses, including	
	info	s. Give specific rmation about m	Name of entity:		% of ownership:	
20.	Negotia	ble instruments in	clude personal checks	negotiable and non-negotial s, cashiers' checks, promissor ot transfer to someone by sign	ry notes, and money orders.	
	info	s. Give specific rmation about m	Issuer name:			
21.		nent or pension ac es: Interests in IR/ profit-sharing p	A, ERISA, Keogh, 401	(k), 403(b), thrift savings acco	ounts, or other pension or	
		s. List each ount separately.	Type of account:	Institution name:		
			401(k) or similar plan:	: 401(k) ERISA Note: just started in Ap	oril	\$330.00
22.	Your sh Exampl		leposits you have mad		service or use from a company gas, water), telecommunications	
	✓ No		In	nstitution name or individual:		
23.	_				r for life or for a number of years)	
	√ No	·	Issuer name and de		,	
24.			IRA, in an account in 29A(b), and 529(b)(1).	n a qualified ABLE program	n, or under a qualified state tuition prog	ıram.
	✓ No ☐ Yes	5	Institution name and	d description. Separately file	the records of any interests. 11 U.S.C. §	521(c)
25.		equitable or future exercisable for y		ty (other than anything liste	ed in line 1), and rights or	
		s. Give specific rmation about ther	n		-	
26.				ts, and other intellectual pro roceeds from royalties and lice		
	✓ No	s. Give specific rmation about ther		,	-	
27.	Exampl		d other general intants, exclusive licenses,	_	dings, liquor licenses, professional license	es
		s. Give specific	n.		-	

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Debtor 1 Debtor 2		Bradley Thomas Cor Sherry Cash Combe		Case number (if known)	
Mor	ney or p	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you			
	⋈ No				
		s. Give specific information		Fe	ederal:
		out them, including whethout the same of the second the	er	Si	tate:
	•	the tax years		Lo	ocal:
29.	Examp	support les: Past due or lump sur	n alimony, spousal support, child support, mai	ntenance, divorce settlement, pr	operty settlement
	✓ No	s. Give specific information	on	Alimony:	
				Maintenance:	
				Support:	
				Divorce settle	ement:
				Property settle	ement:
	✓ No		ility insurance payments, disability benefits, significations in Security benefits; unpaid loans you made to so		
31.	Example No Yes	ts in insurance policies les: Health, disability, or les. Name the insurance mpany of each policy	ife insurance; health savings account (HSA); o	credit, homeowner's, or renter's i	nsurance
	and	d list its value	Company name:	Beneficiary:	Surrender or refund value:
			Term life insurance policy, no cash value		\$1.00
			Term life insurance policy, no cash value.		\$1.00
32.	If you a		due you from someone who has died ng trust, expect proceeds from a life insurance use someone has died	e policy, or are currently	
	✓ No ☐ Yes	s. Give specific information	on		
33.		-	hether or not you have filed a lawsuit or ma ent disputes, insurance claims, or rights to sue		
	✓ No	s. Describe each claim			
34.		contingent and unliquida to set off claims	ated claims of every nature, including count	erclaims of the debtor and	
	✓ No ☐ Yes	s. Describe each claim			

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Debtor 1 Debtor 2		Bradley Thomas Comb Sherry Cash Combes	es	Case number (if known)			
35.	Any fin	ancial assets you did not a	already list				
	□ No ☑ Yes	s. Give specific information	State & Federal tax re insurance proceeds,	o Debtor, unknown at this time efunds, possible garnishment f proceeds related to claims or esserted by the Debtor any claind/or inheritance.	funds, causes of	\$1.00	
36.				uding any entries for pages you ha		\$393.00	
Pa	art 5:	Describe Any Busines	ss-Related Property	You Own or Have an Interes	י st In. List anv	real estate in Part 1.	
		-		business-related property?			
31.	-	. Go to Part 6.	equitable interest in any	business-related property:			
	سا	s. Go to line 38.					
						Current value of the portion you own? Do not deduct secured claims or exemptions.	
38.		nts receivable or commissi	ons you already earned				
	✓ No ☐ Yes	s. Describe					
39.		equipment, furnishings, an les: Business-related compu desks, chairs, electronic	iters, software, modems, p	orinters, copiers, fax machines, rugs,	telephones,		
	✓ No ☐ Yes	s. Describe					
40.	Machir	ery, fixtures, equipment, s	upplies you use in busin	ess, and tools of your trade			
	✓ No ☐ Yes	s. Describe					
41.	Invento	ory					
	✓ No ☐ Yes	s. Describe					
42.	Interes	ts in partnerships or joint v	ventures				
	✓ No ☐ Yes	s. Describe Name of ent	iity:	9	% of ownership:		
43.	Custon	ner lists, mailing lists, or of	ther compilations				
	▼ No □ Yes	s. Do your lists include per No Yes. Describe	rsonally identifiable info	rmation (as defined in 11 U.S.C. § 1	01(41A))?		
44.	Any bu	siness-related property yo	u did not already list				
	✓ No ☐ Yes	s. Give specific information.					
45.		e dollar value of all of your ed for Part 5. Write that nu		uding any entries for pages you ha	ive →	\$0.00	

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		Bradley Thomas Combes Sherry Cash Combes Case number (if known)					
Pa		Farm- and Commercial Fis we an interest in farmland, li		roperty You Own or Have	an Interest In.		
46.	Do you own or have any	legal or equitable interest in any	y farm- or commerc	cial fishing-related property?			
	No. Go to Part 7. Yes. Go to line 47.						
					Current value of the portion you own? Do not deduct secured claims or exemptions.		
47.	Farm animals Examples: Livestock, poul	ltry, farm-raised fish			·		
	✓ No Yes	my, rami raided her					
48.	Cropseither growing or	harvested					
	No Yes. Give specific information						
49.	Farm and fishing equipm	ent, implements, machinery, fix	tures, and tools of	trade			
	✓ No ☐ Yes						
50.	Farm and fishing supplie	s, chemicals, and feed					
	✓ No ☐ Yes						
51.	Any farm- and commercia	al fishing-related property you d	did not already list				
	No ☐ Yes. Give specific information						
52.		II of your entries from Part 6, inc e that number here			\$0.00		
Pa	art 7: Describe All Pi	roperty You Own or Have	an Interest in TI	hat You Did Not List Abov	e		
53.	Do you have other proper Examples: Season tickets	rty of any kind you did not alrea	ady list?				
	✓ No✓ Yes. Give specific info	ormation.					
54.	Add the dollar value of al	Il of your entries from Part 7. W	rite that number he	ere →	\$0.00		

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Debt Debt		Bradley Thomas Combes Sherry Cash Combes	Case nı	umber (if known)	
Pa	art 8:	List the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2		→	\$198,800.00
56.	Part 2:	Total vehicles, line 5	\$3,583.00		
57.	Part 3:	Total personal and household items, line 15	\$2,145.00		
58.	Part 4:	Total financial assets, line 36	\$393.00		
59.	Part 5:	Total business-related property, line 45	\$0.00		
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7:	Total other property not listed, line 54	+ \$0.00		
62.	Total p	personal property. Add lines 56 through 61	\$6,121.00	Copy personal property total	+\$6,121.00
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			\$204,921.00

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	otor 1 otor 2	Bradley Thomas Combes Sherry Cash Combes	Case number (if known)	
9.	Equipm	nent for sports and hobbies (details):		
	1 Othe	r Exercise Equipment of Value		\$100.00
	1 Ridir	Riding Mower, 1 Push Mower, 1 Weed Eater, 1 Hand Tool, 1 Power Tool		\$185.00
	1 Gam	e System, 4 Video Games		\$110.00
12.	Jewelry	y (details):		
	3 Othe	r Rings, 4 Earrings, 2 Necklaces, 2 Bracelets, 2 Other Jewelry		\$50.00
	2 Wato	ches		\$10.00
	Weddi	ng Band		\$100.00

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Debtor 1		donting your	case:				
	Bradley	Thomas	Combes				
Debtor 2	First Name Sherry	Middle Nam Cash	e Last Name Combes				
(Spouse, if filing)		Middle Nam					
United States Ba	ankruptcy Court fo	r the: WESTER	RN DISTRICT OF VI	IRGII	NIA NIA	☐ Check if this is an	
Case number (if known)	_					amended filing	
Official Form	106C						
Schedule C	: The Prope	erty You C	laim as Exem _l	ot			04/16
Using the property space is needed, f	you listed on Scl	hedule A/B: Prop to this page as r	perty (Official Form 10	6A/B)	as your source, list the	esponsible for supplying correct info e property that you claim as exempt. ssary. On the top of any additional	If more
s to state a speci exempted up to the eceive certain be exemption of 100	ific dollar amoun he amount of any enefits, and tax-e % of fair market	t as exempt. A applicable sta exempt retirement value under a la	Iternatively, you may tutory limit. Some ex ent fundsmay be un aw that limits the exe	claii xemp limite empti	n the full fair market v tionssuch as those d in dollar amount. F	you claim. One way of doing so yalue of the property being for health aids, rights to lowever, if you claim an ar amount and the value of the se statutory amount.	
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt				
. Which set of	exemptions are	vou claiming?	Check one only	01/05	if	with you	
				even	IT VOUR SDOUSE IS TIIING		
✓ You are	claiming state and	d federal nonbar	nkruptcy exemptions. U.S.C. § 522(b)(2)		if your spouse is filing S.C. § 522(b)(3)	wiar you.	
You are You are	claiming state and claiming federal e	d federal nonbar exemptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U		·	
You are You are You are Por any prop	claiming state and claiming federal e	d federal nonbar exemptions. 11 Schedule A/B thand line on	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U mpt, 1	S.C. § 522(b)(3)	·	ion
You are You are You are Por any prop	claiming state and claiming federal experty you list on a of the property a	d federal nonbar exemptions. 11 Schedule A/B thand line on	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you	mpt, i Am exe	S.C. § 522(b)(3) ill in the information I ount of the mption you claim	pelow.	ion
You are You are You are You are Prief description Schedule A/B that Brief description:	claiming state and claiming federal elements you list on so of the property at lists this p	d federal nonbar exemptions. 11 Schedule A/B th and line on rty	nkruptcy exemptions. U.S.C. § 522(b)(2) nat you claim as exer Current value of the portion you own Copy the value from	mpt, i Am exe	S.C. § 522(b)(3) ill in the information I ount of the mption you claim eck only one box for	pelow.	ion

□ No □ Yes Case 17-61193 Doc 1 Filed 06/22/17 Entered 06/22/17 13:36:54 Desc Main Document Page 19 of 70

Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes		Case number	(if known)
Part 2:	Additional Page			
	iption of the property and line on A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
miles) KBB Priva \$3,583.00 (2nd exen	ption: D Commander (approx. 170000 ate Party Value Fair Condition apption claimed for this asset) chedule A/B:3.1	\$3,583.00	\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Table, 6 K Refrigerat 2 Other Ki Dryer, 2 R Center, 2 Nightstan 1 Lawn Fu	ouches, 1 Love Seats, 1 Kitchen Litchen Chairs, 1 Stove, 1 Lor, 1 Dishwasher, 1 Microwave, Litchen Appliances, 1 Washer, 1 Lecliner Chairs, 1 Entertainment Desks, 1 Coffee Table, 2 ds, 3 Dressers, 3 Beds, 3 Lamps,	\$780.00	\$780.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Computer	DVD Players, 1 Stereo, 1	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
	ption: xercise Equipment of Value chedule A/B: 9	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
Eater, 1 H	ption: Mower, 1 Push Mower, 1 Weed and Tool, 1 Power Tool chedule A/B:9	\$185.00	\$185.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	ption: ystem, 4 Video Games chedule A/B:9	\$110.00	\$110.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	ption: Vomen's Clothing chedule A/B:11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4)
Bracelets	ption: ings, 4 Earrings, 2 Necklaces, 2 , 2 Other Jewelry chedule A/B:12	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4

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Debtor 1 **Bradley Thomas Combes** Debtor 2 Sherry Cash Combes Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$10.00 \$10.00 Va. Code Ann. § 34-4 $\overline{\mathbf{Q}}$ 2 Watches 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$100.00 \$100.00 Va. Code Ann. § 34-26(1a) $\overline{\mathbf{V}}$ **Wedding Band** 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$10.00 \$10.00 Va. Code Ann. § 34-26(5) \square 1 Dog 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$50.00 \$50.00 Va. Code Ann. § 34-26(6) $\overline{\mathbf{Q}}$ 2 Eyeglasses 100% of fair market П value, up to any Line from Schedule A/B: 14 applicable statutory limit Brief description: Va. Code Ann. § 34-4 \$10.00 \$10.00 $\overline{\mathbf{M}}$ Cash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \$50.00 $\overline{\mathbf{M}}$ \$50.00 Va. Code Ann. § 34-4 **Wells Fargo Checking account** 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: \$330.00 \$1.00 Va. Code Ann. § 34-4 $\overline{\mathbf{V}}$ 401(k) ERISA 100% of fair market Note: just started in April value, up to any (1st exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 21 Brief description: \$330.00 \$1.00 Va. Code Ann. § 34-34 \square 401(k) ERISA 100% of fair market Note: just started in April value, up to any (2nd exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 21 Brief description: \$330.00 11 U.S.C. § 522(b)(3)(C) \$330.00 $\overline{\mathbf{Q}}$ 401(k) ERISA 100% of fair market Note: just started in April value, up to any (3rd exemption claimed for this asset) applicable statutory limit Line from Schedule A/B: 21

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Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes			Case number	r (if known)
Part 2:					
	ription of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	rom Check only one box for each exemption		
(1st exem	iption: insurance policy, no cash value aption claimed for this asset) Schedule A/B:31	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
(2nd exer	iption: insurance policy, no cash value mption claimed for this asset) Schedule A/B:31	\$1.00		\$0.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. §§ 38.2-3122, 3123
(1st exem	iption: insurance policy, no cash value. inption claimed for this asset) Schedule A/B:31	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
(2nd exer	iption: insurance policy, no cash value. inption claimed for this asset) Schedule A/B:31	\$1.00		\$0.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. §§ 38.2-3122, 3123
this time, refunds, p insurance claims or asserted earned bu inheritance	funds due to Debtor, unknown at including State & Federal tax possible garnishment funds, e proceeds, proceeds related to causes of action that may be by the Debtor any claim for ut unpaid wages and/or	\$1.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4

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Fill in this infor	nation to identi	ify your ooos				
	radley	Thomas Middle Name	Combes Last Name	_		
Debtor 2 Si (Spouse, if filing)		Cash Middle Name	Combes Last Name			
United States Bankr	uptcy Court for the:	WESTERN DIS	TRICT OF VIRGINIA			
Case number (if known)					Check if this is amended filing	
Official Form 1 Schedule D: 0		o Have Cla	ims Secured b	/ Property		12/15
1. Do any creditors No. Check Yes. Fill in a Part 1: List A 2. List all secured claim, list the cre creditor has a pa	have claims secu	this form to the combelow. ms r has more than combe other creditors in the combelow.	ourt with your other sch one secured one than one n Part 2. As	,	ing else to report on thi Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$175,514.00	\$198,800.00	
Seterus Inc Creditor's name 14523 SW Millikan Number Street	Way St	— 225 Frost D 24538 —	rive Concord, VA			
Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Deb		Continger Unliquida Disputed Nature of lier An agreer Statutory Judgmen		s mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$175,514.00

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•		Case number (if known)						
er listing any entries on		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any				
	Describe the property that secures the claim:	\$24,890.00	\$198,800.00	\$1,604.00				
	225 Frost Drive Concord, VA 24538							
Debtor 2 only the debtors and another claim relates ty debt	☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as ☐ Statutory lien (such as tax lien, me ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) 2nd Deed of Trust	mortgage or secured	car loan)					
f (rry Cash Combes Iditional Page er listing any entries on quentially from the previous from the complex of the	Describe the property that secures the claim: 225 Frost Drive Concord, VA 24538	Case number (if Iditional Page er listing any entries on this page, number them quentially from the previous page. Describe the property that secures the claim: 225 Frost Drive Concord, VA 24538 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) 2nd Deed of Trust	Iditional Page er listing any entries on this page, number them quentially from the previous page. Describe the property that secures the claim: 225 Frost Drive Concord, VA 24538 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) 2nd Deed of Trust				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$24,890.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$200,404.00

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					_								
Fill in this ir	nformation to id	dentify your c	ase	:									
Debtor 1	Bradley	Thomas		Combes									
	First Name	Middle Name		Last Name									
Debtor 2	Sherry	Cash		Combes									
(Spouse, if filing	g) First Name	Middle Name		Last Name									
United States B	ankruptcy Court for	the: WESTERN	N DI	STRICT OF VIRGINIA									
Case number (if known)										Check if amende		an	
Official Forr	n 106E/F												
Schedule E	/F: Creditor	s Who Hav	e U	Insecured Claims								1	2/15
Do not include a If more space is to this page. On	ny creditors with needed, copy the	partially secured Part you need, f ditional pages, w	l cla ill it vrite	on Schedule G: Executory Co ims that are listed in Schedul out, number the entries in the your name and case number ured Claims	e D: box	<i>Credi</i> es on	tor:	s W	ho H	lold Claim	s Secur	ed by Prop	erty.
1. Do any cred	ditors have priority	unsecured clai	ms a	gainst you?									
☐ No. Go ✓ Yes.	to Part 2.												
claim. For e show both p more space	each claim listed, ide riority and nonpriori	entify what type o ty amounts. As n ty unsecured clai	f cla nuch	litor has more than one priority im it is. If a claim has both prio as possible, list the claims in a ill out the Continuation Page of	rity a	nd no petica	npr ıl or	iorit der	y am acco	ounts, list ording to the	that clair e credito	m here and or's name. I	
(For an expl	anation of each typ	e of claim, see th	e ins	tructions for this form in the ins	tructi	on bo	okl	et.					
						Tota	al c	lain	n	Priority amount		Nonprior amount	ity
2.1					_		\$4	128	.00	\$4	28.00	\$	00.00
Campbell Coul Priority Creditor's Na	nty Treasurer's (Office	- La	st 4 digits of account number	3	9		9	6				
	efferson, Treasu	rer		nen was the debt incurred?	201			<u> </u>	Ť				
Number Street P O Box 37										_			
			-As	of the date you file, the claim Contingent	is: (Check	k all	tha	at app	oly.			
Rustburg	VA	24588-0000	- 님	Unliquidated									
City	State	ZIP Code	- 🗖	Disputed									
Who incurred th		one.	Ту	pe of PRIORITY unsecured cl	aim:								
☐ Debtor 1 only ☐ Debtor 2 only				Domestic support obligations Taxes and certain other debts	· VOII	owe t	he i	aov	۵rnm	ent			
Debtor 1 and	Debtor 2 only			Claims for death or personal i	•			_		ent			
	of the debtors and a		_	intoxicated	-								
☐ Check if this Is the claim subj	claim is for a con lect to offset?	ιιιιαπιτу αερτ		Other. Specify									
-	out to onset:												
☑ No □ Yes													

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Debtor 1 Bradley Thomas Combes Sherry Cash Combes	Case number (if known)							
Part 1: Your PRIORITY Unsecured C	aims Continuation Page							
After listing any entries on this page, number then previous page.	n sequentially from the		Γotal	clai	m	Priority amount	Nonpriority amount	
Internal Revenue Service*** Priority Creditor's Name P O Box 7346 Number Street	\$11,916.00 \$11,916.00 \$0.0 — Last 4 digits of account number 7 0 6 3 — When was the debt incurred? 2014-2015 — As of the date you file, the claim is: Check all that apply.							
Philadelphia PA 19101 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of PRIORITY unsecured clai Domestic support obligations Taxes and certain other debts y Claims for death or personal inj intoxicated Other. Specify	ou o		_		ent		
2.3		_		\$	1.00	\$1.00	\$0.00	
Va Department Of Taxation* Priority Creditor's Name Bankruptcy Unit Number Street P O Box 2156	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim i				3 nat app	– oly.		
Richmond VA 23218-0000 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated							

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Debtor 1 Debtor 2 Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims
Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc	claims against you? . Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
Calvary Portfolio Services Nonpriority Creditor's Name 500 Summit Lake Ste 400 Number Street	\$2,663.00 Last 4 digits of account number 9 5 6 5 When was the debt incurred? 03/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Valhalla City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes 4.2	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card \$2,121.00
Capital One Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 30253 Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 3 4 6 6 When was the debt incurred? 06/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card

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Debtor 1 Bradley Thomas Combes Sherry Cash Combes	Case number (if known)	
Part 2: Your NONPRIORITY Uns	secured Claims Continuation Page	
After listing any entries on this page, number previous page.	er them sequentially from the	Total claim
4.3		\$3,993.00
Cedar Financial	Last 4 digits of account number 3 1 3 6	
Nonpriority Creditor's Name	When was the debt incurred? 2013	
5230 Las Virgenes Rd Ste Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Calabasas CA 91302	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community d		
Is the claim subject to offset?	•	
☑ No		
Yes		
4.4		\$5,880.00
Chase Card	Last 4 digits of account number 8 4 7 3	Ψ3,000.00
Nonpriority Creditor's Name	When was the debt incurred? 2014	
Attn: Correspondence Dept		
Number Street PO Box 15298	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Wilmin at an DE 40050	Disputed	
Wilmington DE 19850 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community d		
Is the claim subject to offset?	Gredit Gard	
✓ No		
Yes		
4.5		\$3,401.00
Chase Card	Last 4 digits of account number 8 1 2 0	
Nonpriority Creditor's Name	When was the debt incurred? 07/2016	
Attn: Correspondence Dept Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15298	Contingent	
	Unliquidated	
Wilmington DE 19850	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community d	ebt Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		

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Debtor 1 Bradley Thomas Combes Debtor 2 Sherry Cash Combes	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$784.00
Comenity Bank/Maurices	Last 4 digits of account number6406_	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182125	□ Contingent □ Unliquidated	
	Disputed	
Columbus OH 43218 City State ZIP Code	Type of NONERIORITY unccoured claims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Vas		
Yes		
4.7		\$750.00
Comenity Bank/Torrid	_ Last 4 digits of account number _ 0 _ 4 _ 2 _ 4	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 06/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182125	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	□ Disputed	
Columbus OH 43218 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
4.8		\$1,693.00
Credit Control Corp	Last 4 digits of account number0827_	
Nonpriority Creditor's Name PO Box 120568	When was the debt incurred? 10/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
November Navia	Disputed	
Newport News VA 23612 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Open Account	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Bradley Thomas Combes Debtor 2 Sherry Cash Combes	Case number (if known)	
	red Claims Continuation Page	
After listing any entries on this page, number the previous page.		Total claim
4.9		\$204.00
Creditors Collection Service/CCS	Last 4 digits of account number 1 7 2 0	
Nonpriority Creditor's Name PO Box 21504	When was the debt incurred? 04/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Roanoke VA 24018 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	moulou.	
☑ No		
Yes		
4.10		\$2,788.00
Discover Financial	Last 4 digits of account number 4 7 6 9	Ψ2,1 00.00
Nonpriority Creditor's Name	When was the debt incurred? 07/2016	
PO Box 3025 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
New Albany OH 43054		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt ls the claim subject to offset?	Credit Card	
No No		
Yes		
411		•
[4.11]	Lock A digital of account number 0 0 0 7	\$13,728.00
Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number 0 2 0 7	
Po Box 60610	When was the debt incurred? 2012	
Number Street	As of the date you file, the claim is: Check all that apply. — — Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	✓ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	_	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Bradley Thomas Combes Debtor 2 Sherry Cash Combes	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$118.00
Lynchburg Anesthesia Associates Inc	Last 4 digits of account number 0 0 6 1	
Nonpriority Creditor's Name 10800 Midlothian Tnpke, Ste 265	When was the debt incurred? 03/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
N. (1.0) (1.7) NA 00005	Disputed	
North Chesterfield VA 23235 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.13		\$1,008.00
Orthopaedic Center of Central Va Nonpriority Creditor's Name	Last 4 digits of account number 7 9 1 4	
D/B/A Órtho Virginia	When was the debt incurred? 05/2016	
Number Street 2405 Atherholt Rd.	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Lynchburg VA 24501	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt ls the claim subject to offset?	Medical	
✓ No		
Yes		
4.14		\$1,312.00
Orthopaedic Center of Central Va	Last 4 digits of account number 0 8 3 3	φ1,312.00
Nonpriority Creditor's Name	When was the debt incurred?	
D/B/A Ortho Virginia Number Street	As of the date you file, the claim is: Check all that apply.	
2405 Atherholt Rd.	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Lynchburg VA 24501 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Bradley Thomas Combes Debtor 2 Sherry Cash Combes	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$928.00
PayPal Credit	Last 4 digits of account number 6 0 7 1	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 5138 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Timonium MD 21094		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations crising out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		
4.16		\$6,050.00
Post University Nonpriority Creditor's Name	_ Last 4 digits of account number _2 _4 _2 _2	
PO Box 1048	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Salem NH 03079 City State ZIP Code	Turns of NONDRIORITY unreserved eleiter	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Open Account	
☑ No		
Yes		
4.17		¢2.422.00
Regional Adjustment Bureau Inc.	Last 4 digits of account number 0 2 0 0	\$2,433.00
Nonpriority Creditor's Name	Last 4 digits of account number0200	
PO Box 34111 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Memphis TN 38184-0111	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Open Account	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Bradley Thomas Combes Debtor 2 Sherry Cash Combes	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$895.00
SCA Credit Services	Last 4 digits of account number 0 4 4 6	
Nonpriority Creditor's Name 1502 Williamson Road NE	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	□ Unliquidated □ □ Disputed	
Roanoke VA 24012		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? ✓ No		
Yes		
4.19		\$1,559.00
Synchrony Bank/Amazon Nonpriority Creditor's Name	_ Last 4 digits of account number _1_ 0_ 2_ 4_	
Attn: Bankruptcy	When was the debt incurred? 2014	
Number Street PO Box 956060	As of the date you file, the claim is: Check all that apply.	
1 0 DOX 330000	_	
	Disputed	
Orlando FL 32896 City State ZIP Code	Type of NONERIORITY uncestured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.20		\$4,018.00
Synchrony Bank/Old Navy	Last 4 digits of account number 9 8 0 1	Ψ-1,010.00
Nonpriority Creditor's Name	When was the debt incurred? 2015	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 956060	_ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
☐ Yes		

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Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Yes □ 4.22 1-22 1-3 7 When was the debt incurred? When was the debt incurred? When was the debt incurred? Mailstopn BT POB 9475 Minneapolis MN 55440 Minneapolis MN 55440 Minneapolis MN 55440 Minneapolis MN 55440 Minneapolis Minneapolis MN 55440 Minneapolis MN Minnea	Debtor 1 Debtor 2	Bradley Thomas Com Sherry Cash Combes	bes Case number (if known)					
Activation Sankruptcy Activation Street Activation State Zip Code Contingent C	Part 2: Your NONPRIORITY Unsecured Claims Continuation Page							
Synchrony Bank/TJX Last 4 digits of account number	-		number them sequentially from the	Total claim				
Last 4 digits of account number 2 5 9 0 Norpriority Creditor's Name Attn: Bank/Tuptcy When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply.	4.21			\$2,826,00				
When was the debt incurred? 2013	Synchron	v Bank/T.JX	Last 4 digits of account number 2 5 9 0	Ψ2,020.00				
As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed City State Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Target As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Target As of the date you file, the claim is: Check all that apply. When was the debt incurred? Student loans Debtor 1 only When was the debt incurred? When was the debt incurred? Only State Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 or profit-sharing plans, and other similar debts Other. Specify Credit Card	Nonpriority Cr	editor's Name						
Contingent		<u> </u>						
Orlando FL 32896 City State ZiP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 4 tleast one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ Nonpriority Creditor's Name COF Financial & Retail Srvs Number Street Mailstopn BT POB 9475 Minneapolis Minneapolis Minneapolis Minneapolis Minneapolis Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 3 only □ Debtor 1 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 6 or a community debt □ Debtor 8 or brointy claims □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 3 or a community debt □ Debtor 4 or a community debt □ Debtor 5 or a community debt □ Debtor 6 nor a community debt □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 3 or a community debt □ Debtor 4 or a community debt □ Debtor 5 or a community debt □ Debtor 6 nor a community debt □ Debtor 8 nor a community or profit-sharing plans, and other similar debts □ Debtor 2 only □								
Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 3 and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Noppriority Creditor's Name C/O Financial & Retail Srvs Nompro Street Mailstopn BT POB 9475 □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt State ZIP Code Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts of a community debt State IP Code Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 3 and Debtor 2 only □ Debtor 4 and Debtor 2 only □ Debtor 5 contingent □ Debtor 5 contingent □ Debtor 5 contingent □ Debtor 6 contingent □ Debtor 9 contingent □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 contingent □								
Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card \$580.00 Target Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Mailstopn BT POB 9475 Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Type of NONPRIORITY unsecured claim: Debts 1 and Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Debts 1 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts 1 only Contingent Debtor 2 only Debtor 3 only Debtor 4 only Contingent Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 9 only Debto	Orlando	FI 32						
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. □ Check if this claim is for a community debt Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card \$580.00 \$580.00 \$580.00 \$580.00 \$580.00 \$580.00 \$580.00 Target Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Disputed □ Disputed Type of NONPRIORITY unsecured claim: □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	City) Os de					
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes 4.22 \$580.00 Target Last 4 digits of account number C/O Financial & Retail Srvs Number Street Mailstopn BT POB 9475 When was the debt incurred? Debtor 2 only Minneapolis MN 55440 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Credit Card Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Credit Card Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Credit Card Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 4 and Debtor 5 only Debtor 6 and Debtor 9 only Debtor 6 and Debtor 9 only Debtor 7 only Debtor 8 or profit-sharing plans, and other similar debts Credit Card			· · · · · · · · · · · · · · · · · · ·					
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nomeriority Creditor's Name C/O Financial & Retail Srvs Number Mailstopn BT POB 9475 When was the debt incurred? Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Target Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Minneapolis MN 55440 Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card \$580.00	별 ~	•		orce				
At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Speci	<u> </u>	•	that you did not report as priority claims					
Check if this claim is for a community debt is the claim subject to offset? ✓ No	ш	•	ther 🗖 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ır debts				
Is the claim subject to offset? No Yes 4.22 Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Minneapolis MN 55440 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Minneapolis MN 55440 Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	<u> </u>		✓ Other. Specify					
\$580.00 A.22 Same	_		Credit Card					
\$580.00 Target Complete Comp		subject to offset?						
\$\$80.00 Target	= \(\cdot\)							
Target C/O Financial & Retail Srvs Number Street Mailstopn BT POB 9475 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Last 4 digits of account number 9 1 3 7 When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card								
Nonpriority Creditor's Name C/O Financial & Retail Srvs Number Street Mailstopn BT POB 9475 Minneapolis City Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt When was the debt incurred? 2014 As of the date you file, the claim is: Check all that apply. Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	4.22			\$580.00				
C/Ó Financial & Retail Srvs Number Street Mailstopn BT POB 9475 Minneapolis City Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt When was the debt incurred? Z014 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	Target		Last 4 digits of account number 9 1 3 7					
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			When was the debt incurred? 2014					
Minneapolis City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Credit Card								
Minneapolis Minneapolis Minneapolis State ZIP Code City State ZIP Code Check one. Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			_					
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City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	Minneano	lie MN 55						
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Credit Card	City		Ocale					
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt	Who incurr	ed the debt? Check one	••					
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt	ш	.*		orce				
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Debts to pension or profit-snaring plans, and other similar debts Other. Specify Credit Card		•						
☐ Check if this claim is for a community debt Credit Card	브 ******	•	Debts to pension or profit-sharing plans, and other similar	ır debts				
- Ground Gard	<u> </u>		✓ Other. Specify					
IS THE CIAIM SUPJECT TO OTISET?	_		Credit Card					
		subject to offset?						
☑ No ☐ Yes	≌ ∵							

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Debtor 1 Debtor 2	Bradley Thom Sherry Cash C						Case	e number (if known)
Part 3:	List Others	to Be	Notified Abou	ut a Debt	That `	You Alread	y Li:	sted
For ex credit debts	xample, if a collector in Parts 1 or 2,	tion ag then li Parts 1	ency is trying to st the collection a l or 2, list the add	collect from agency here litional cred	n you fo e. Simi ditors h	or a debt you larly, if you ha	owe ave n	bbt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
CCS Name				On whic	h entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
PO Box 2 Number	21504 Street			Line 4 .	.14 of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Roanoke City		VA State	24018 ZIP Code	— Last 4 d —	ligits of	f account num	ber	
Centra Ho	ealth *			On whic	ch entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
	ghorne Road Street			Line4	1.9 of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Lynchbur City		VA State	24501 ZIP Code	— Last 4 d —	ligits of	f account num	ber	
	Bankruptcy *			On whic	h entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
Number	g & Savings Acco	ounts		Line 4 .	.17 _of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Richmon		VA State	23260-0000 ZIP Code	— Last 4 d —	ligits of	f account num	ber	
Synchror	ny Bank/Sams C	lub		On whic	ch entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
PO Box 1 Number	105972 Street			Line4	1.1 of	(Check one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta City		GA State	30348 ZIP Code	— Last 4 d —	ligits of	f account num	ber	
	lical Center Payr	oll		On whic	ch entry	y in Part 1 or I	Part 2	2 did you list the original creditor?
P O Box 8 Number	800750 Street			Line4	1.8 of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Charlotte City		VA State	22908-0000 ZIP Code	— Last 4 d —	ligits of	f account num	ber	

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Debtor 1 Bradley Thomas Combes Sherry Cash Combes							Case number (if known)			
Part 3: List Others to Be Notified About a Deb					∍bt Th	nat Y	ou Alread	y Li:	sted Continuation Page	
Walden U	niversity			On v	which e	entry	in Part 1 or	Part 2	2 did you list the original creditor?	
Name 100 Wash	ington Avenue	South		Line	4.3	of	(Check one)		Part 1: Creditors with Priority Unsecured Claims	
Number	Street					_		$\overline{\mathbf{Q}}$	Part 2: Creditors with Nonpriority Unsecured Claims	
 Minneapo	lis	MN	55401	—— Last	4 digit	ts of	account nur	nber		
City		State	ZIP Code							

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Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$12,345.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$12,345.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$13,728.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} ◀	\$46,004.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$59,732.00

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Fill	in this inf	ormation to id	entify your case:				
Debt	or 1	Bradley	Thomas	Combes			
		First Name	Middle Name	Last Name			
Debt		Sherry	Cash Middle Name	Combes Last Name			
(Spo	use, if filing)	First Name	Middle Name	Last Name			
Unite	ed States Bar	nkruptcy Court for	the: WESTERN DIST	TRICT OF VIRGIN	IA		
Case	number					□ Cho	eck if this is an
(if kn	own)					_	ended filing
Offic	ial Farm	1060					•
	ial Form						
Sch	edule G	Executory	Contracts and	Unexpired L	.eases		12/15
1. D 	o you have No. Che Yes. Fill ist separate for (for exa	any executory co ck this box and file in all of the inform ly each person or imple, rent, vehich tracts and unexpir	ation below even if the company with whom le lease, cell phone).	leases? It with your other scheontracts or leases It you have the content of th	nedules. You are listed on S ract or lease. for this form in	have nothing else to rep Schedule A/B: Property (. Then state what each in the instruction booklet at the contract or lease	(Official Form 106A/B). n contract or lease for more examples of
2.1			,		2 Recline		
2.1	Name	sive Leasing				t to be ASSUMED	
		outh Jordan Gat Street	eway STE 100		_		
	South Jo		UT State	84095 ZIP Code	-		
2.2	Verizon** Name	***			2 Cell Ph	nones t to be ASSUMED	
		nology Dr. # 55	0		-	LO DE ACCOMILD	
	inumber 8	Street					

MO

State

63304-2225

ZIP Code

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Fi	ll in this inf	ormation to	identify your case:			
De	ebtor 1	Bradley First Name	Thomas Middle Name	Combes Last Name	_	
	ebtor 2 pouse, if filing)	Sherry First Name	Cash Middle Name	Combes Last Name		
Ur	nited States Bai	nkruptcy Court to	or the: WESTERN DIS	STRICT OF VIRGINIA	-	
	ase number known)				Check if this is an amended filing	
Off	ficial Form	106H				
Sc	hedule H:	Your Cod	lebtors			12/15
nee	ded, copy the se. On the top	Additional Page	e, fill it out, and numbe al Pages, write your n	r the entries in the boxes	g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.	
2.			•	• • • •	tory? (Community property states and territories Texas, Washington, and Wisconsin.)	
	✓ No. Go t Yes. Did No Yes		ormer spouse, or legal e	quivalent live with you at th	e time?	
3.	person show creditor on S	n in line 2 agair chedule D (Offi	n as a codebtor only if	that person is a guaranto dule E/F (Official Form 10	lebtor if your spouse is filing with you. List the r or cosigner. Make sure you have listed the 6E/F), or <i>Schedule G</i> (Official Form 106G). Use	
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the	debt

Check all schedules that apply:

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L	ill in this inform	nation to ider	ntify your case:						
	Debtor 1	Bradley	Thomas	Combes					
		First Name	Middle Name	Last Name			Che	eck if this is:	
	Debtor 2 (Spouse, if filing)	Sherry First Name	Cash Middle Name	Combes Last Name			$- \Box$	An amended filing	
	United States Bankr	uptcy Court for the	he: WESTERN D	ISTRICT OF VI	RGINI <i>A</i>	١	_ 🗆	A supplement showing po	•
	Case number (if known)				_			chapter 13 income as of the	ne rollowing date:
	,	.cı						MM / DD / YYYY	
_	fficial Form 10	_							40/45
50	chedule I: Yo	ur income							12/15
inc abo you	lude information about your spouse. If ur name and case n	oout your spous more space is	se. If you are separ needed, attach a se n). Answer every o	ated and your sp parate sheet to t	ouse is	not fi	ling with y	spouse is living with you, rou, do not include inform any additional pages, wri	ation
1.	Fill in your emplo information.	yment		Debtor 1				Debtor 2 or non-filing s	chouse
	If you have more the job, attach a separation at	ate page Em	nployment status	Employed Not employ	vod.			☑ Employed	spouse
	additional employe	ers.	cupation	Shipping	eu			Not employed RN	
	Include part-time,	seasonal,							-:-
	or self-employed w	ork. En	iployer's name	Manpower				UVA Farmville Dialys	SIS
	Occupation may in student or homema		ployer's address	18013 Forest Number Street	Rd ST	E A07	•	4105 Lewis & Clark I	Drive
	applies.							Box 800900	
								_	
				Forest		VA	24551	Charlottesville \	VA 22908
				City		State	Zip Code	City	State Zip Code
		Но	w long employed ti	nere? <u>3 mon</u>	ths		_	2 months	
E	art 2: Give D	etails About	Monthly Incom	e					
			-		nina to	renort	for any line	, write \$0 in the space. Inc	lude vour
	n-filing spouse unles			Il you have not	mig to	гороп	ior any inte	, while to in the space. The	idde yedi
-	ou or your non-filing I need more space, a	•		er, combine the inf	ormatio	on for a	all employe	rs for that person on the lin	es below. If
						For De	ebtor 1	For Debtor 2 or non-filing spouse	
2.			/, and commissions nthly, calculate what		2.	\$	1,693.55	\$6,278.98	
3.	Estimate and list	monthly overting	ne pay.		3. +		\$0.00	\$0.00	
4.	Calculate gross i	ncome. Add line	e 2 + line 3.		4.	\$	1,693.55	\$6,278.98	

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	btor 1 Bradley Thomas Combes						
Debt	Sherry Cash Combes			Case nu	mber (if known)		
			F-	or Debtor 1	For Debtor 2 non-filing sp		
	Copy line 4 here	→	4.	\$1,693.55	\$6,278	.98	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deduc	ctions	5a.	\$377.52	\$1,347	.13	
	5b. Mandatory contributions for retirement p	lans	5b.	\$0.00	\$0	.00	
	5c. Voluntary contributions for retirement pla	ans	5c.	\$0.00	\$0	.00	
	5d. Required repayments of retirement fund	loans	5d.	\$0.00	\$0	.00	
	5e. Insurance		5e.	\$0.00	\$282	.58_	
	5f. Domestic support obligations		5f.	\$0.00	\$0	.00	
	5g. Union dues		5g.	\$0.00	\$0	.00	
	5h. Other deductions. Specify:		5h. +	\$0.00	\$0	.00	
6.	Add the payroll deductions. Add lines 5a + 5 5g + 5h.	5b + 5c + 5d + 5e + 5f +	6.	\$377.52	\$1,629	<u>.71</u>	
7.	Calculate total monthly take-home pay. Su	btract line 6 from line 4.	7.	\$1,316.03	\$4,649	.27	
8.	List all other income regularly received:						
	8a. Net income from rental property and from business, profession, or farm	n operating a	8a.	\$0.00	\$0	.00	
	Attach a statement for each property and bugross receipts, ordinary and necessary busithe total monthly net income.	9					
	8b. Interest and dividends		8b.	\$0.00	\$0	.00	
	8c. Family support payments that you, a non dependent regularly receive	-filing spouse, or a	8c.	\$0.00		.00	
	Include alimony, spousal support, child support divorce settlement, and property settlement						
	8d. Unemployment compensation		8d.	\$0.00	\$0	.00	
	8e. Social Security		8e.	\$0.00		.00	
	8f. Other government assistance that you re Include cash assistance and the value (if kr cash assistance that you receive, such as for (benefits under the Supplemental Nutrition or housing subsidies.	nown) or any non- ood stamps					
	Specify:		8f.	\$0.00	\$0	.00	
	8g. Pension or retirement income		8g.	\$0.00	\$0	.00	
	8h. Other monthly income.						
	Specify: Contribution from Tax Refur		8h. +	\$185.00		.00	
9.	Add all other income. Add lines 8a + 8b + 8c +	· 8d + 8e + 8f + 8g + 8h.	9.	\$185.00	\$0	.00	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debto	r 2 or non-filing spouse.	10.	\$1,501.03	+ \$4,649	.27	\$6,150.30
11.	State all other regular contributions to the exp Include contributions from an unmarried partner, friends or relatives.				ur roommates, a	nd othe	r
	Do not include any amounts already included in I	lines 2-10 or amounts that	are not	available to pay	expenses listed	in Sche	dule J.
	Specify:					11. +	\$0.00
12.	Add the amount in the last column of line 10 t					12.	\$6,150.30
	income. Write that amount on the Summary of Y if it applies.	our Assets and Liabilities	and Ce	rtain Statistical Ir	nformation,		Combined
13.	Do you expect an increase or decrease within	the year after you file th	is form	?			monthly income
	✓ No. None.						
	Yes. Explain:						

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G	ill in this inform	nation to ident	ify your case:			Chas	k if this is		
	Debtor 1	Bradley	Thomas	Comb	bes		An amend		
		First Name	Middle Name	Last Na	ame	🗖 /	A supplen	ment showing	
	Debtor 2 (Spouse, if filing)	Sherry First Name	Cash Middle Name	Comb Last Na			chapter 1: following	3 expenses as date:	s of the
	United States Bankr	uptcy Court for the	E WESTERN DIST	RICT OF	VIRGINIA	 	MM / DD /	/ YYYY	_
	Case number (if known)								
O	fficial Form 10	6J				J			
S	chedule J: Yo	ur Expense	es						12/15
nai	rrect information. If	more space is n	ole. If two married pe eeded, attach anothe swer every question. ehold	-		-		-	
1.	Is this a joint case	e?							
2.	No	ebtor 2 live in a s	eparate household? ile Official Form 106J-2	2, Expense	s for Separate Housel	nold of [Debtor 2.		
	Do not list Debtor		Yes. Fill out this info for each dependent.		Dependent's relation Debtor 1 or Debtor			ependent's ge	Does dependent live with you?
	Debtor 2.				Son		1	1	□ No ✓ Yes
	Do not state the de names.	ependents'			Son		8	l	No Yes
					-				Yes No
									Yes No Yes
3.	Do your expenses expenses of peop yourself and you	ole other than	✓ No ☐ Yes						
Ē	Part 2: Estima	ate Your Ongo	ing Monthly Expe	enses					
to		of a date after the	kruptcy filing date ur e bankruptcy is filed.	-	_			-	
			sh government assist n Schedule I: Your In	-				Your expense	es
4.	Include first mortga	age payments and	enses for your reside any rent for the groun				4.		\$1,444.12
	If not included in								
	4a. Real estate ta						4a.		
		neowner's, or rente					4b.		A.22.2
	4c. Home mainte	nance, repair, and	upkeep expenses				4c.		\$100.00
	4d. Homeowner's	association or co	ndominium dues				4d.		

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Debtor 1 **Bradley Thomas Combes** Debtor 2 **Sherry Cash Combes** Case number (if known) Your expenses Additional mortgage payments for your residence, such as home equity loans 5. \$78.00 **Utilities:** 6. 6a. Electricity, heat, natural gas 6a. \$250.00 6b. Water, sewer, garbage collection 6b. \$95.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$164.00 cable services 6d. 6d. Other. Specify: Cell Phone(s) \$280.00 Food and housekeeping supplies 7. \$800.00 \$390.00 8. Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$300.00 10. Personal care products and services 10. \$175.00 11. Medical and dental expenses 11. \$150.00 12. Transportation. Include gas, maintenance, bus or train 12. \$550.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. \$150.00 magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$144.00 15d. Other insurance. Specify: 15d. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Specify: Personal Property Taxes \$37.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: Progressive Leasing prorated 17c. \$11.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

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Debtor 1 Debtor 2		Bradley Thomas Combes Sherry Cash Combes	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Othe	Specify: See continuation sheet	21. +	\$250.00
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$5,368.12
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$5,368.12
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$6,150.30
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$5,368.12
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$782.18
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortg		
	=	No. Yes. Explain here: Note: Wife drives 100 miles daily. Child care in Summer (3mos) \$65/weekly amount shown above is an average.) is \$165/weekly the remainder	r of the year is

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Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
	. Specify: care/Food		\$100.00
	gency Fund		\$100.00 \$100.00
visio	n		\$50.00
		Total:	\$250.00

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Fill in this information to identify your case:						
Debtor 1	Bradley	Thomas	Combes			
	First Name	Middle Name	Last Name			
Debtor 2	Sherry	Cash	Combes			
(Spouse, if filing)	First Name	Middle Name	Last Name			
		Middle Name or the: WESTERN DIS				

☐ Check if this is an amended filing

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended

P	art 1: Summarize Your Assets	
		Your assets Value of what you owr
-	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$198,800.0
	1b. Copy line 62, Total personal property, from Schedule A/B	\$6,121.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$204,921.0
P	Part 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$200,404.0
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$12,345.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$59,732.0
	Your total liabilities	\$272,481.0
	Ourse Verrier Verrier	
	art 3: Summarize Your Income and Expenses	
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$6,150.3
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,368.1

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	tor 1 tor 2	Bradley Thomas Combes Sherry Cash Combes Case number (if known)							
Pa	art 4:	Answer These Questions for Administrative and Statistical Re	cords						
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?							
	□ No	 You have nothing to report on this part of the form. Check this box and submit this 	s form to the court with you	r other schedules.					
7.	What k	ind of debt do you have?							
	fa	bur debts are primarily consumer debts. Consumer debts are those "incurred by a mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpour debts are not primarily consumer debts. You have nothing to report on this pairs form to the court with your other schedules.	poses. 28 U.S.C. § 159.						
В.		he Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from	\$5,287.04					
9.	Copy t	he following special categories of claims from Part 4, line 6 of Schedule E/F:							
			Total claim						
	From F	Part 4 on Schedule E/F, copy the following:							
	9a. Do	omestic support obligations. (Copy line 6a.)	\$0.00	<u></u>					
	9b. Ta	axes and certain other debts you owe the government. (Copy line 6b.)	\$12,345.00	<u>-</u>					
	9c. CI	aims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	<u>-</u>					
	9d. St	tudent loans. (Copy line 6f.)	\$13,728.00	<u>-</u>					
		bligations arising out of a separation agreement or divorce that you did not report as iority claims. (Copy line 6g.)	\$0.00	_					
	9f. De	ebts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00	<u>-</u>					

9g. Total. Add lines 9a through 9f.

\$26,073.00

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Fill in this inf	ormation to id	entify your case	:	
Debtor 1	Bradley First Name	Thomas Middle Name	Combes Last Name	
Debtor 2	Sherry	Cash	Combes	
(Spouse, if filing)		Middle Name	Last Name	
United States Ba	nkruptcy Court for	the: WESTERN DIS	STRICT OF VIRGINIA	
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an In	dividual Debt	or's Schedules	12/15
concealing prope \$250,000, or impri	rty, or obtaining n	noney or property by	chedules or amended schedul y fraud in connection with a ba 18 U.S.C. §§ 152, 1341, 1519, a	inkruptcy case can result in fines up to
Did you pay	or agree to pay so	meone who is NOT	an attorney to help you fill out	bankruptcy forms?
☑ No				
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt true and corr		lare that I have read	the summary and schedules f	iled with this declaration and that they are

Sherry Cash Combes, Debtor 2

MM / DD / YYYY

Date 06/05/2017

Bradley Thomas Combes, Debtor 1

MM / DD / YYYY

Date <u>06/05/2017</u>

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Fill in this i	nformation to	identify your case	:		
Debtor 1	Bradley	Thomas	Combes		
	First Name	Middle Name	Last Name	_	
Debtor 2	Sherry	Cash	Combes	_	
(Spouse, if filin	g) First Name	Middle Name	Last Name		
United States B	Bankruptcy Court fo	or the: WESTERN DIS	STRICT OF VIRGINIA	_	
Case number				Charle if this is an	
(if known)				Check if this is an amended filing	
0000	407				
Official For	<u>m 107</u>				
Statement	of Financia	I Affairs for Ind	lividuals Filing for	Bankruptcy	04/16
	•	nown). Answer every out Your Marital S	Status and Where You	Lived Before	
1. What is you	ur current marital	etatus?			
Married		status :			
☐ Not ma					
2. During the	last 3 years, have	you lived anywhere o	other than where you live no	ow?	
✓ No	,	,			
	ist all of the places	you lived in the last 3 y	ears. Do not include where y	ou live now.	
3. Within the	last 8 years, did y	ou ever live with a spo	ouse or legal equivalent in a	community property state or territory?	
` ,	/ property states ar n, and Wisconsin.)	nd territories include Ar	izona, California, Idaho, Louis	siana, Nevada, New Mexico, Puerto Rico, Texas,	
▼ No					
☐ Yes. M	lake sure you fill ou	ut Schedule H: Your Co	debtors (Official Form 106H).		

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		Bradley Thomas Combes Sherry Cash Combes		Case nur	Case number (if known)					
Pa	art 2:	Explain the Sources of Your Income								
4.	Fill in th	have any income from employne total amount of income you rece te filing a joint case and you have it	ived from all jobs and all bus	inesses, including part	t-time activities.	endar years?				
	Yes	. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ry 1 of the current year until filed for bankruptcy:	Wages, commissions, bonuses, tips	\$6,291.00	Wages, commissions, bonuses, tips	\$18,633.00				
			Operating a business		Operating a business					
		calendar year:	✓ Wages, commissions, bonuses, tips	\$4,703.00	Wages, commissions, bonuses, tips	\$48,843.00				
(Jan	uary 1 to	December 31, <u>2016</u>)	Operating a business		Operating a business					
		ndar year before that:	Wages, commissions, bonuses, tips	\$38,000.00	Wages, commissions, bonuses, tips	\$40,000.00				
(Jan	uary 1 to	December 31, 2015)	Operating a business		Operating a business					
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4.						vsuits; royalties;				
	□ No ☑ Yes	. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions				
		ry 1 of the current year until filed for bankruptcy:	Hardship Withdrawal	\$1,400.00						
For the last calendar year: (January 1 to December 31, 2016) YYYYY		December 31, 2016)								
		ndar year before that: December 31, 2015	401k Withdrawal	\$25,000.00	401k Withdrawal	\$68,000.00				

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		Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
Р	art 3:	List Certain Payments You Made Before You Filed	for Bankruptcy
6.	Are eith	her Debtor 1's or Debtor 2's debts primarily consumer debts?	
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. "incurred by an individual primarily for a personal, family, or house	- , ,
		During the 90 days before you filed for bankruptcy, did you pay ar	y creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$6,4 total amount you paid that creditor. Do not include paym child support and alimony. Also, do not include payment	ents for domestic support obligations, such as
		* Subject to adjustment on 4/01/19 and every 3 years after that for	r cases filed on or after the date of adjustment.
	√ Yes	s. Debtor 1 or Debtor 2 or both have primarily consumer debts.	
		During the 90 days before you filed for bankruptcy, did you pay ar	y creditor a total of \$600 or more?
		✓ No. Go to line 7.	
		Yes. List below each creditor to whom you paid a total of \$600 creditor. Do not include payments for domestic support Also, do not include payments to an attorney for this ban	obligations, such as child support and alimony.
7.	Insiders corporat agent, ir	1 year before you filed for bankruptcy, did you make a payment of include your relatives; any general partners; relatives of any general ations of which you are an officer, director, person in control, or owner including one for a business you operate as a sole proprietor. 11 U.S is child support and alimony.	partners; partnerships of which you are a general partner; of 20% or more of their voting securities; and any managing
	✓ No ☐ Yes	s. List all payments to an insider.	
В.		1 year before you filed for bankruptcy, did you make any paymented an insider?	ts or transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	s. List all payments that benefited an insider.	

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		Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
P	art 4:	Identify Legal Actions, Repossessions, and Foreclosure	es
9.	List all s	year before you filed for bankruptcy, were you a party in any lawsuit, uch matters, including personal injury cases, small claims actions, divorce tions, and contract disputes.	· · · · · · · · · · · · · · · · · · ·
	☑ No □ Yes	. Fill in the details.	
10.	seized,	year before you filed for bankruptcy, was any of your property repos or levied? Il that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
		Go to line 11. Fill in the information below.	
11.		00 days before you filed for bankruptcy, did any creditor, including a b s from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
12.		year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
P	art 5:	List Certain Gifts and Contributions	
13.	Within 2	gyears before you filed for bankruptcy, did you give any gifts with a to	tal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any c	t years before you filed for bankruptcy, did you give any gifts or contri harity?	butions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
P	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptcy saster, or gambling?	, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	

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Debtor 1 Debtor 2	Bradley T Sherry Ca			Cas	se number (if kr	nown)	
Part 7:	List Ce	rtain P	ayments or ⁻	Transfers			
anyon Include	e you consu e any attorney	Ited abo	ut seeking ban	otcy, did you or anyone else acting on you kruptcy or preparing a bankruptcy petition reparers, or credit counseling agencies for s	on?		
_	Group, PLL Was Paid Side Drive			Description and value of any property to See Exhibit A to Form 2016	ransferred	Date payment or transfer was made 06/05/2017	Amount of payment \$550.00
Lynchburg City Email or webs		VA State	24501-3602 ZIP Code				
Person Who I	Made the Paym	ent, if Not	You				
Freedom I	Debt Relief Was Paid :h Grant Str			Description and value of any property to Debt Consolidation Note: was refunded \$600.00 of that after cancelling services		Date payment or transfer was made 2016-2017	Amount of payment \$2,464.00
San Mateo)	CA State	94402 ZIP Code				
Email or webs	site address						
17. Within anyon Do not	e who promi include any	re you fi sed to h	led for bankrup nelp you deal w	otcy, did you or anyone else acting on you ith your creditors or to make payments to you listed on line 16.			perty to

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Debtor 1 Debtor 2	_	Bradley Th Sherry Cas				Case nu	mber (if known)	
pro Incl	perty lude b	transferred	I in the transfe	ordinary cours	se of your business or finan	cial affairs? ranting of a security	r any property to anyone, other	
	No Yes.	Fill in the de	etails.					
Carma	v				Description and value of a property transferred	•	be any property or payments ed or debts paid in exchange	Date transfer was made
	ho Red	ceived Transfe Run	r		2004 Ford F150	\$4,500	0.00	12/2016
Number	Stree	t						
Lynchb	ourg		VA State	24502 ZIP Code				
Person's	s relati	onship to yo		Zii Gode				
yoı √	u are a	-	y? (uptcy, did you transfer any called asset-protection device		settled trust or similar device	or wnich
Part 8	8:	List Cert	ain Fi	nancial Acc	ounts, Instruments, Sa	ıfe Deposit Box	es, and Storage Units	
Incl	lude cl uses, p No	hecking, sav	vings, r Is, coop			•	s shares in banks, credit unions,	brokerage Last balance
0	- (D -				number	instrument	was closed,	before closing or transfer
		nkruptcy * al Institution	•		VVVV	⊘ Checking	2/2017	(\$2,433.00)
Number	Stree	Savings A t D Box 261		nts	xxxx	Savings Money market Brokerage		(ψ2,+33.00)
Richmo City	ond		VA State	23260-0000 ZIP Code		Other		
Beacor	n Cre	dit Union *	****		Last 4 digits of account number	Type of account instrument	was closed,	Last balance before closing or transfer
Name of F	Financia eg W.	al Institution McConvill		nager/CEO	xxxx	✓ Checking✓ Savings✓ Money market		\$55.00
6320 Lo L ynchb City		s Lane	VA State	24502 ZIP Code		☐ Brokerage ☐ Other		
Jily			Jiait	ZII COUE				

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	otor 1 Bradley Thomas Combes otor 2 Sherry Cash Combes Case number (if known)	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
	✓ No ☐ Yes. Fill in the details.	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ✓ №	
	Yes. Fill in the details.	
Р	art 9: Identify Property You Hold or Control for Someone Else	
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.	
	✓ No ☐ Yes. Fill in the details.	
Р	art 10: Give Details About Environmental Information	
For	the purpose of Part 10, the following definitions apply:	
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.	
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites.	
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.	
Rep	port all notices, releases, and proceedings that you know about, regardless of when they occurred.	
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?	
	✓ No ☐ Yes. Fill in the details.	
25.	Have you notified any governmental unit of any release of hazardous material?	
	✓ No Yes. Fill in the details.	
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.	
	✓ No ☐ Yes. Fill in the details.	

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Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes		Case number (if known)
Part 11:	Give Details About Your Business	or Connections to Ar	ny Business
27. Within busine	a 4 years before you filed for bankruptcy, did yess?	you own a business or hav	re any of the following connections to any
[] []	A sole proprietor or self-employed in a trade, A member of a limited liability company (LLC) A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equity	or limited liability partnershi a corporation	
لت	o. None of the above applies. Go to Part 12.es. Check all that apply above and fill in the deta	ails below for each business.	
	a 2 years before you filed for bankruptcy, did y ancial institutions, creditors, or other parties.	you give a financial statem	ent to anyone about your business? Include
□ No	os. Fill in the details below.		
Part 12:	Sign Below		
hat answe property by	I the answers on this <i>Statement of Financial A</i> ers are true and correct. I understand that may fraud in connection with a bankruptcy case B U.S.C. §§ 152, 1341, 1519, and 3571.	king a false statement, cor	ncealing property, or obtaining money or
	dley Thomas Combes X Thomas Combes, Debtor 1	Is/ Sherry Cash Combes, Debt	
Date _	06/05/2017	Date06/05/2017	
Did you att	ach additional pages to Your Statement of Fir	nancial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
▼ No Yes			
Did you pa	y or agree to pay someone who is not an atto	rney to help you fill out ba	nkruptcy forms?
☑ No ☐ Yes. N	lame of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$75	filing fee administrative fee trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA LYNCHBURG DIVISION

In re Bradley Thomas Combes Case No.
Sherry Cash Combes
Chapter 13

	Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was:
	✓ Debtor ☐ Other (specify)
3.	The source of compensation to be paid to me is:
	☐ Debtor ☑ Other (specify) To be paid by the Chapter 13 Trustee. See Exhibit A.
4.	✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

| Date | Isl Heidi Shafer for Cox Law Group, PLLC | Heidi Shafer for Cox Law Group, PLLC | Bar No. 48765 | Cox Law Group, PLLC | 900 Lakeside Drive | Lynchburg, VA 24501-3602 | Phone: (434) 845-2600 / Fax: (434) 845-0727

/s/ Bradley Thomas Combes	/s/ Sherry Cash Combes
Bradlev Thomas Combes	Sherry Cash Combes

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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA LYNCHBURG DIVISION

IN RE: Bradley Thomas Combes Sherry Cash Combes

CASE NO

CHAPTER 13

COVERSHEET FOR LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors, which consists of 4 page(s), is true, correct and complete to the best of my knowledge.

Date	6/5/2017	Signature // Is/ Bradley Thomas Combes Bradley Thomas Combes
Data	6/5/2017	Signature _/s/ Sherry Cash Combes
Date	9,0,2011	Sherry Cash Combas

Calvary Portfolio Services 500 Summit Lake Ste 400 Valhalla, NY 10595

Campbell County Treasurer's Office c/o Robin R. Jefferson, Treasurer P O Box 37
Rustburg, VA 24588-0000

Capital One Attn: Bankruptcy PO Box 30253 Salt Lake City, UT 84130

CCS PO Box 21504 Roanoke, VA 24018

Cedar Financial 5230 Las Virgenes Rd Ste Calabasas, CA 91302

Centra Health *
2301 Langhorne Road
Lynchburg, VA 24501

Chase Card Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850

Comenity Bank/Maurices Attn: Bankruptcy PO Box 182125 Columbus, OH 43218

Comenity Bank/Torrid Attn: Bankruptcy PO Box 182125 Columbus, OH 43218 Credit Control Corp PO Box 120568 Newport News, VA 23612

Creditors Collection Service/CCS PO Box 21504 Roanoke, VA 24018

Discover Financial PO Box 3025 New Albany, OH 43054

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Internal Revenue Service***
P O Box 7346
Philadelphia, PA 19101

Lynchburg Anesthesia Associates Inc 10800 Midlothian Tnpke, Ste 265 North Chesterfield, VA 23235

Orthopaedic Center of Central Va D/B/A Ortho Virginia 2405 Atherholt Rd. Lynchburg, VA 24501

PayPal Credit PO Box 5138 Timonium, MD 21094

Post University PO Box 1048 Salem, NH 03079 Progressive Leasing 10619 South Jordan Gateway STE 100 South Jordan, UT 84095

Regional Adjustment Bureau Inc. PO Box 34111 Memphis, TN 38184-0111

SCA Credit Services 1502 Williamson Road NE Roanoke, VA 24012

Seterus Inc 14523 SW Millikan Way St Beavertton, OR 97005

Suntrust Bank Po Box 85052 Richmond, VA 23285

Suntrust Bankruptcy *
Checking & Savings Accounts
RIC 9394 PO Box 26150
Richmond, VA 23260-0000

Synchrony Bank/Amazon Attn: Bankruptcy PO Box 956060 Orlando, FL 32896

Synchrony Bank/Old Navy Attn: Bankruptcy PO Box 956060 Orlando, FL 32896

Synchrony Bank/Sams Club PO Box 105972 Atlanta, GA 30348 Synchrony Bank/TJX Attn: Bankruptcy PO Box 956060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

UVA Medical Center Payroll
P O Box 800750
Charlottesville, VA 22908-0000

Va Department Of Taxation* Bankruptcy Unit P O Box 2156 Richmond, VA 23218-0000

Verizon****
500 Technology Dr. # 550
Weldon Spring, MO 63304-2225

Walden University 100 Washington Avenue South Minneapolis, MN 55401 Case 17-61193 Doc 1 Filed 06/22/17 Entered 06/22/17 13:36:54 Desc Main Document Page 67 of 70

	ill in thin inf					Chock as	directed in lines 1	7 and 21:
	III IN this int	ormation to identif	ry your case:					
D	ebtor 1		Thomas //iddle Name	Combes Last Name		Statement:	the calculations require	d by this
D	ebtor 2	Sherry (Cash	Combes			ble income is not deter	mined
(5	Spouse, if filing)	First Name N	Middle Name	Last Name		11	I U.S.C. § 1325(b)(3).	- d
U	nited States Ba	nkruptcy Court for the: V	WESTERN DIS	TRICT OF VIRGI	NIA		ble income is determine I U.S.C. § 1325(b)(3).	; a
c	ase number					3. The com	nmitment period is 3 year	ars.
(if	f known)					4. The com	nmitment period is 5 yea	ars.
Of	ficial Form	122C-1				☐ Check if the	nis is an amended filing	ı
_		Statement of Yo	our Current	t Monthly Inc	ome			
an	d Calcula	tion of Commit	<u>ment Perio</u>	d				12/15
		es. On the top of any a		•	and case n	umber (if knowr)).	
1.	What is your	marital and filing statu	s? Check one or	nly.				
	☐ Not mari	Not married. Fill out Column A, lines 2-11.						
	Married. Fill out both Columns A and B, lines 2-11.							
	bankruptcy c August 31. If in the result.	rage monthly income to ase. 11 U.S.C. § 101(1) the amount of your mon Do not include any incorthat property in one column.	0A). For example the thick that the thick the thick the thick the thick the thick the thick the	le, if you are filing one d during the 6 mont than once. For exa	n Septemb ths, add the mple, if bo	er 15, the 6-mont income for all 6 th spouses own t	h period would be Marc months and divide the he same rental property	th 1 through total by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.		rages, salary, tips, bon	uses, overtime,	and commissions		\$1,048.57	\$4,005.14	1
3.	Alimony and	maintenance payment	s. Do not include	e payments from a s	spouse.	\$0.00	\$0.00	
4.	expenses of y regular contrib your depende	from any source which you or your dependent outions from an unmarrients, parents, and roommot include payments you	es, including chiled partner, member ates. Do not inc	d support. Include ers of your househo	old,	\$0.00	\$233.33	
5.	Net income fi	rom operating a busine	ess, profession,	or farm				
			Debtor 1	Debtor 2				
	Gross receipts deductions)	s (before all	\$0.00	\$0.00				
	Ordinary and expenses	necessary operating -	\$0.00	\$0.00	Сору			
	Net monthly ir profession, or	ncome from a business, farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	

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	tor 1 tor 2	Bradley Thomas Combe Sherry Cash Combes	es		C	ase number (if kı	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	•
6.	Net	income from rental and other r	eal property					
		ss receipts (before all uctions)	Debtor 1 \$0.00	Debtor 2 \$0.00				
	Ordi	inary and necessary operating - enses	\$0.00	\$0.00	Conv			
	Net	monthly income from rental or er real property	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00	
7.	Inte	rest, dividends, and royalties				\$0.00	\$0.00	
8.	Une	mployment compensation				\$0.00	\$0.00	
•	Do r	not enter the amount if you conte efit under the Social Security Act				Ψ0.00		
	F	or you		\$0.	00			
	F	For your spouse		\$0.	00			
9.		sion or retirement income. Do a benefit under the Social Secur		ount received that		\$0.00	\$0.00	
	sepa	aternational or domestic terrorism arate page and put the total belov	N.	otner sources on a				
11.	Calc	culate your total average month	nly income.		·		<u> </u>	
		lines 2 through 10 for each coluin add the total for Column A to the		B.		\$1,048.57	+ \$4,238.47	= \$5,287.04
	1110			.				Total average monthly income
Pa	art 2	Determine How to M	easure Your Do	eductions fror	n Income	9		
12.	Сор	y your total average monthly in	ncome from line 11	1				\$5,287.04
13.	Cald	culate the marital adjustment.	Check one:					
		You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exc necessary, list additional adjust. If this adjustment does not apply	se is filing with you. se is not filing with y listed in line 11, Co n as payment of the luding this income a ments on a separat	vou. Dlumn B, that was less spouse's tax liabies and the amount of	lity or the sp	oouse's support o	of someone other	
		Total				\$0.00 Copy	y here →	\$0.00
14	Vou	r current monthly income. Sub	otract the total in lin	e 13 from line 12				\$5,287.04

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	otor 1 otor 2		radley Thomas Combes herry Cash Combes	Case number (if known)				
15.	Calc	ulate	ate your current monthly income for the year. Follow these steps:					
	15a. Copy line 14 here 😝					\$5,287.04		
		Mu	Itiply line 15a by 12 (the number of months in a	year).	X	12		
	15b.	The	e result is your current monthly income for the ye	ear for this part of the form		\$63,444.48		
		ulate	the median family income that applies to you	u. Follow these steps:				
	16a.	Fill	in the state in which you live.	Virginia				
	16b.	Fill	in the number of people in your household.	4				
	16c.	Fill	in the median family income for your state and	size of household		\$97,731.00		
		То		s, go online using the link specified in the separate				
17.	How	do ti	he lines compare?					
	17a.		•	the top of page 1 of this form, check box 1, <i>Disposable incom</i> Do NOT fill out Calculation of Your Disposable Income (Official				
	17b.			page 1 of this form, check box 2, <i>Disposable income is determ</i> out Calculation of Your Disposable Income (Official Form 1 on thly income from line 14 above.		der		
P	art 3		Calculate Your Commitment Period	Under 11 U.S.C. § 1325(b)(4)				
18.	Сору	you	ır total average monthly income from line 11.		_	\$5,287.04		
19.	that	calcu		married, your spouse is not filing with you, and you contend § 1325(b)(4) allows you to deduct part of your spouse's				
	19a.	If th	ne marital adjustment does not apply, fill in 0 on	line 19a		\$0.00		
	19b.	Sul	btract line 19a from line 18.			\$5,287.04		
20.	Calc	ulate	your current monthly income for the year.	Follow these steps:				
	20a.	Co	oy line 19b			\$5,287.04		
		Mu	Itiply by 12 (the number of months in a year).		Х	12		
	20b.	The	e result is your current monthly income for the ye	ear for this part of the form.		\$63,444.48		
	20c.	Col	by the median family income for your state and	size of household from line 16c.		\$97,731.00		
21.	How	do t	he lines compare?					
			20b is less than line 20c. Unless otherwise order k box 3, <i>The commitment period is 3 years</i> . Go	ered by the court, on the top of page 1 of this form, to Part 4.				
			20b is more than or equal to line 20c. Unless o s form, check box 4, <i>The commitment period is</i>	therwise ordered by the court, on the top of page 1 5 years. Go to Part 4.				

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Debtor 1 Debtor 2	Bradley Thomas Combes Sherry Cash Combes	Case number (if known)
Part 4:	Sign Below	
By sig	ning here, under penalty of perjury I declare that	the information on this statement and in any attachments is true and correct.
X /s/	Bradley Thomas Combes	χ /s/ Sherry Cash Combes
Bra	adley Thomas Combes, Debtor 1	Sherry Cash Combes, Debtor 2
Dat	te 6/5/2017	Date 6/5/2017
	MM / DD / YYYY	MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.